•)/	1	7	96M	18 ·
n									Application or Docket Number					
•	PATENT AP		Ĺ	•		67								
	CLAIMS AS FILED - PART I (Column 1) (Column 2)									חווע		OTHER	THAN	·
TOTAL CLAIMS			1/2					RATE	$\overline{}$	FEE	Ĭ	RATE	FEE	ĺ
FOR			NUMBER	RLED ·	NUMBER EXTRA			BASICF	ब	375.00	OR	BASIC FEE	760.00	
TOTAL CHARGEABLE CLAIMS			\2minus 20∞		• 9			X\$ 9-	.]		OR	X\$18=		·
INDEPENDENT CLAIMS			2_min	nus 3 =	6/			X42=		OR	X84=	<u> </u>	:	
MU	LTIPLE DEPENDI	ENT CLAIM P	RESENT					+140=			OR	+280=		3
* If the difference in column 1 is less than zero, enter "O" in column 2											OR	TOTAL	<u>></u> 7 (ه	I
	SE GE	aims as a	MENDED	- PAR	TO.	•			- <u>I</u>		10	OTHER		1 1
L	X1.04	(Column 1) CLAMS		(Colus		(Column 3)		SMAL	LE	NTITY	OR	SMALL		1
AMENDMENT A		REMAINING AFTER AMENOMENT		NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	·	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	,
3	Tetal •	13	Minus	, 0	50			X\$ 9:	٠	:	OR	X\$18=		
	Independent •		Minus	 C	3	<u> -</u>		X42-			OR	X84=		
L	FIRST PRESEN	TATION OF M	JETIPLE DE	ENUEN	CLAIM		j	+140:			OR	+280=		
	· ^			٠				YOU ADDIT FI			00	TOTAL ADDIT, FEE		•
رم	0190	Column 1)			mn 2)	(Column 3		POLICE L. FI			•	resulti. PEE	•	1
AMENDMENT B		CLAIMS REMAINING · AFTER AMENDMENT		NUM PREVI	EST BEA OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total		Minus ·	-0	<i>D</i> .	2		X\$ 9			OR	-8 EX	102	}
AME	independent .	<u> </u>	Minus	•••	3			X42=			OR	X84= -		1 .
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140:	-	•	OR	+280=	13	1 _
#	7. 北方5	.						ADDIT. F			OR	ADDIT. F.EE		1 .
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AMENDMENT C		REMAINING AFTER AMENIDMENT		NUA PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE		ADOI- TIONAL FEE		RATE.	ADDI- TIONAL FEE	
Z OZ	Total	32	Minus	2		• —		X\$ 9:	.]		OR	X\$18=-		} ∴
3		<u>ر</u>	Mious) ··· · ·	10	4	X42=			OR	X84=_		
<u> </u>	FIRST PRESEN	HAMUN OF M	ULI D'ELE DE	PENUEN			ك	+140-	_		OR	+280=_		1 : 4
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "tighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 											OR	TOTAL		1
•	if the "Highest Num "If the "Highest Num The "Highest Humb	ther Printeredy S	2M For DI TH	IS SPACE	is less th	an 3. eater "3."	•	ADOIT F	7	ropriete bo	•	ADDIT. FEE		

*** \$ 40 M

Priority and Transpirate Office, U.S. DEPARTMENT OF COMMERCE